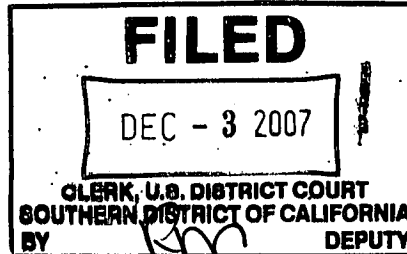


RE: Q. DIAZ GATES-NGUYEN
 ATTN: N. GATES GARRUCHA-GALLEGOS
 446 ALTA ROAD B# 7775738
 S.D., CA 92158

FILED

NOV 15 2007

CLERK, U.S. DISTRICT COURT
 EASTERN DISTRICT OF CALIFORNIA
 BY DEPUTY CLERK



07CV 2282 DMS BLM

UNITED STATES DISTRICT COURT
 NORTHERN DISTRICT OF CALIFORNIA

L. GARCIA MONTANA;
 Q. GATES DIAZ NGUYEN (Q5);
 N. GATES GARRUCHA-GALLEGOS (Q4);
 N. G. GATES-GALLEGOS (Q3); ET AL.

Plaintiffs,

vs.

MANUEL LUIS RAMIREZ,

Defendant.

2:07-CV-2475 FCD JFM
 CASE NO. (P.C.)

**PRISONER'S
 APPLICATION TO PROCEED
 IN FORMA PAUPERIS**

I, Q. GATES DIAZ NGUYEN (Q5), declare, under penalty of perjury that I am the plaintiff in the above entitled case and that the information I offer throughout this application is true and correct. I offer this application in support of my request to proceed without being required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.

In support of this application, I provide the following information:

1. Are you presently employed? Yes X No

If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer:

Gross: \$1.00 PER YEAR + STOCKS Net: \$1.00 PER YEAR + STOCKS

Employer: MICROSOFT INVESTMENT CLUBS, INC.

MISSION IMPOSSIBLE CLUBS, INC. / MISSION IMPOSSIBLE CANNER (MTC)

If the answer is "no," state the date of last employment and the amount of the gross and net salary

1 and wages per month which you received. (If you are imprisoned, specify the last place of
2 employment prior to imprisonment.)

3 N/A

4
5
6 2. Have you received, within the past twelve (12) months, any money from any of the following
7 sources:

8 a. Business, Profession or Yes ___ No X
9 self employment

10 b. Income from stocks, bonds, Yes ___ No X
11 or royalties?

12 c. Rent payments? Yes ___ No X

13 d. Pensions, annuities, or Yes ___ No X
14 life insurance payments?

15 e. Federal or State welfare payments, Yes ___ No X
16 Social Security or other govern-
17 ment source?

18 If the answer is "yes" to any of the above, describe each source of money and state the amount
19 received from each.

20 N/A

21
22 3. Are you married? Yes ___ No X

23 Spouse's Full Name: (WIFE WAS LOST AT KATLINA FLOODS IN 2005.)

24 Spouse's Place of Employment: N/A

25 Spouse's Monthly Salary, Wages or Income:

26 Gross \$ N/A Net \$ N/A

27 4. a. List amount you contribute to your spouse's support: \$ _____

28 b. List the persons other than your spouse who are dependent upon you for support

and indicate how much you contribute toward their support. (NOTE: For minor children, list only their initials and ages. DO NOT INCLUDE THEIR NAMES.)

N/A

5. Do you own or are you buying a home? Yes ___ No X

Estimated Market Value: \$ N/A Amount of Mortgage: \$ N/A

6. Do you own an automobile? Yes ___ No X

Make N/A Year N/A Model N/A

Is it financed? Yes ___ No X If so, Total due: \$ N/A

Monthly Payment: \$ N/A

7. Do you have a bank account? Yes ___ No X (Do not include account numbers.)

Name(s) and address(es) of bank: N/A

Present balance(s): \$ N/A

Do you own any cash? Yes ___ No X Amount: \$ ___

Do you have any other assets? (If "yes," provide a description of each asset and its estimated market value.) Yes ___ No X

8. What are your monthly expenses?

Rent: \$ N/A Utilities: N/A

Food: \$ N/A Clothing: N/A

Charge Accounts:

Name of Account	Monthly Payment	Total Owed on This Acct.
<u>N/A</u>	\$ <u> </u>	\$ <u> </u>
<u>N/A</u>	\$ <u> </u>	\$ <u> </u>
<u>N/A</u>	\$ <u> </u>	\$ <u> </u>

9. Do you have any other debts? (List current obligations, indicating amounts and to whom they are payable. Do not include account numbers.)

10. Does the complaint which you are seeking to file raise claims that have been presented in other lawsuits? Yes ___ No X

Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in which they were filed.

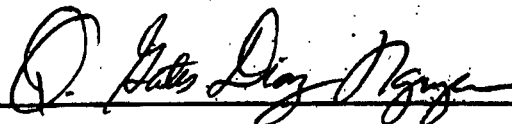
N/A

I consent to prison officials withdrawing from my trust account and paying to the court the initial partial filing fee and all installment payments required by the court.

I declare under the penalty of perjury that the foregoing is true and correct and understand that a false statement herein may result in the dismissal of my claims.

2007 Nov. 11

DATE



SIGNATURE OF APPLICANT